PTO/SB/01 (06-03)

Approved for use through 07/31/2003. OMB 0551-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Derwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

| Attorney Docket Number | 1 MIL-2.001 ARATION FOR UTILITY OR First Named Inventor R. Craig Miller DESIGN COMPLETE IF KNOWN PATENT APPLICATION (37 CFR 1.63) Application Number 10/659,635 Filing Date 9/9/2003 Declaration Declaration Submitted after Initial Submitted OR Art Unit 3652 With Initial Filing (surcharge (37 CFR 1.16 (e)) Filing **Examiner Name** Unknown required) I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.										
I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:										
SYSTEMS AND METHODS FOR COMPACT ARRANGEMENT OF FOODSTUFF IN A CONVEYANCE SYSTEM										
(Title of the Invention)										
the specification of whic										
is attached hereto										
OR				i						
was filed on (MM/DD/YYYY)		09/09/2003	as Unit	T International						
Application Number 10/659,635			and was amended on (MM/DD/YYYY)					(if applicable).		
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.										
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.										
I hereby claim foreign inventor's or plant bree country other than the lapplication for patent, in before that of the applic	priority benefit der's rights ce United States of oventor's or pla	ts unde rtificate of Amer ant bree	r 35 U.S.C. 119(a) (s), or 365(a) of any ica, listed below and der's rights certificate is claimed.	-(d) or (f), y PCT inte d have als ite(s), or a	or 365(b) o emational ap to identified b	plication whi below, by chi	ecking the bolication hav	ed at least one lox, any foreign ing a filing date		
Prior Foreign Applica	tion Cou	ntry	Foreign Filing		Prio Not Cl		Certified C Yes	opy Attached? No		
N/A N/A Additional foreign a							O2B attach	D D D D D D D D D D D D D D D D D D D		
I I⊟I Additional foreign a	application nun	nbers al	re listed on a supple	ementai pr	ionty data Sh	CCL FIOISD	TUZD auduli	ed nerew.		

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. [Page 1 of 2]

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/01 (06-03)
Approved for use through 07/31/2003. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to:	correspondence to: Customer Number:					OR Correspondence address below			ow	
Name										
N/A										
Address										
City				State				ZIP		
Country		Telephone				Fax				
I hereby declare that all statem and belief are believed to be statements and the like so mad false statements may jeopardiz	true; and fur te are punishat	ther that the ole by fine or	ese stat r imprisc	ements onment,	were or both	made wi h, under '	th the kno 18 U.S.C.	owledge that willful fa	ise	
NAME OF SOLE OR FIRST IN	VENTOR:		Ap	etition h				ned inventor		
Given Name (first and middle [if any]) R. Craig					Family Name or Surname Miller					
Inventor's Signature	Will							B/26/03		
Residence: City	State			Country			Citize	Citizenship		
La Mirada	CA			USA			USA	USA		
Mailing Address 15160 Desman Road										
City	State				ZIP	,		Country		
La Mirada	CA			90638				USA		
NAME OF SECOND INVENTO	R:				A pet	tition has	been filed	for this unsigned inven	itor	
Given Name GRAVY F. DI GORLAND (first and middle [if any])				Family Name or Surname DiGerlando				do		
Inventor's Signature	0.6	nla	-la					9-5-41		
Residence: City State CFDAR BLUFF ALA					Country CHAROKOO USA YOS					
Mailing Address	189									
CUDAR BLUFF	State AIA				ZIP Cour 35559 CH			AROKO E		
Additional inventors or a legal re	presentative are be	ing named on th	ie	suppleme	ntal shee	it(s) PTO/SB	/02A or 02LF	altached hereto.		